

submitted that the subject matter recited therein is supported by the specification as filed. As stated in the Summary of the Invention and as shown in the drawing figures, self-expanding structure in the form of for example, an attachment system is delivered within vasculature separate from a graft component. Moreover, in the Detailed Description at page 11, grafts are described as being formed from such materials as Dacron, Polytetrafluoroethylene, polyester materials and silicone which are materials which can form non self-expanding structure. Therefore, it is believed that claim 17 satisfies the requirements of § 112.

Additionally, in the outstanding Office action, claims 11-13 and 17-20 were rejected under 35 U.S.C. § 102(b) as being anticipated by Orth (5,800,521) and claims 14-16 were rejected under 35 U.S.C. § 103(a) as being unpatentable over Orth in view of Inoue (5,843,162). It is respectfully submitted, however, that the cited art does not teach the subject matter in amended independent claim 11 and the claims depending therefrom. That is, Orth does not teach applying a traction force to a first end of a main body to advance and place the main body in a desired position within vasculature but rather discloses pull strands which are taught to be employed to place a graft and an anchoring member in an overlapping configuration after the stent and graft are placed in an appropriate position within a patient (See Col. 3, Ins. 10-13 of Orth). As such, it is believed that claims 11-20 define patentable subject matter.

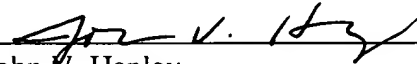
### CONCLUSION

Applicant has attempted to respond to each and every rejection set forth in the outstanding Office Action. In view of the above amendments and remarks, Applicant respectfully requests that the application be reconsidered, the claims allowed and the application passed to issue.

Attached hereto is a marked-up version of the changes made to the claims by the current Amendment. The attached page is captioned "VERSION WITH MARKINGS TO SHOW CHANGES MADE."

Respectfully submitted,

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VERSION WITH MARKINGS TO SHOW CHANGES MADE

IN THE CLAIMS

1. (Twice Amended) A method for the percutaneous insertion of a graft having a bore and being supported by at least one attachment system within the vascular system of a patient, the graft capable of assuming a compressed condition and an uncompressed condition, and the at least one attachment system being compressible and expandable radially between [a compressed and] an expanded and compressed condition, the method comprising:

inserting the graft into the vascular system by direct percutaneous insertion;

applying a traction force to opposing ends of the graft to control the position of the graft within the vasculature, wherein the traction force is carried out using a plurality of catheters, each catheter configured to exert a force on the graft from a different point outside the vasculature;

positioning the graft adjacent a diseased portion of the vascular system;

subsequently inserting at least one attachment system into the graft in compressed condition by direct percutaneous insertion into a point of access to the vascular system over a prepositioned guidewire;

positioning the at least one attachment system within the bore of the graft; and

activating the at least one attachment system from its compressed condition to its expanded condition; [and]

[implanting]wherein the attachment system is implanted in the graft to form a seal between the graft and the vascular wall.

7. (Twice Amended) The method of claim [5]3, wherein the graft is configured to have a bifurcated profile having a superior trunk with [an]a superior end and first and second inferior legs each with an inferior end, and wherein a first catheter having a first end and a second end is releasably connected by the first end to the superior end of the graft and configured so that the second end thereof extends through a point of access to the vasculature in the left axillary artery, a second catheter having a first end and a second end is releasably connected by the first end to the inferior end of the first leg and configured so that the second end thereof extends through a point of access to the vasculature in a first iliac artery, and a third catheter having a first and second end is releasably connected by the first end to the inferior end of the second leg and configured so that the second end thereof extends through a point of access to the vasculature in a second iliac artery.

11. (Amended) A method of implanting a modular graft device within vasculature, the modular graft device including a bifurcated main body having a first end portion and a second end portion including a first leg and a second leg, comprising:

- inserting the bifurcated main body within vasculature;
- applying a traction force to the first end of the main body to advance and place the main body in a desired position within vasculature; and
- inserting a radially self-expanding device within one of the first and second legs.

16. (Amended) The method of claim 11, further comprising positioning the main body adjacent a diseased portion of vasculature, the positioning [stent]step including applying a traction force to each of the first end and first and second legs of the bifurcated main body.